

APPLICATION DATA SHEET**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)? No

Number of Copies of CRF::

Title: BUMPER DEVICE

Attorney Docket Number: 015275-085

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets: 5

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: Japan

Status: Full Capacity

Given Name: Shinichi

Middle Name:

Family Name: HANEDA

Name Suffix:

City of Residence: Anjo-shi

State or Province of Residence: Aichi-ken

Country of Residence: Japan

Street of Mailing Address: 1-9-17, Imaike-cho

City of Mailing Address: Anjo-shi

State or Province of Mailing Address: Aichi-ken

Country of Mailing Address: Japan

Postal or Zip Code of Mailing Address: 446-0071

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Kiyoichi
Middle Name::	
Family Name::	KITA
Name Suffix::	
City of Residence::	Toyota-shi
State or Province of Residence::	Aichi-ken
Country of Residence::	Japan
Street of Mailing Address::	20-7-209, Nakaneyama, Takaokahonmachi
City of Mailing Address::	Toyota-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	473-0922
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Kazunari
Middle Name::	
Family Name::	AZUCHI
Name Suffix::	

City of Residence:: Himi-shi
State or Province of Residence:: Toyama-ken
Country of Residence:: Japan
Street of Mailing Address:: 34-39, Saiwai-cho
City of Mailing Address:: Himi-shi
State or Province of Mailing Address:: Toyama-ken
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 935-0021

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP03/05035	04/21/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Yes	Japan	2002-116953	04/19/02

Assignee Information

Assignee Name:: Aisin Seiki Kabushiki Kaisha

Street of Mailing Address:: 1, Asahi-machi 2-chome

City of Mailing Address:: Kariya-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 448-0032

Assignee Name:: Aisin Keikinzoku Kabushiki Kaisha

Street of Mailing Address:: 12-3, Nagonoe

City of Mailing Address:: Shinminato-shi

State or Province of Mailing Address:: Toyama-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 934-0031